The owner and contractor are to perform all work in accordance with Water Quality Program's Rules and Regulations and the **Best Management Practices Manual**

Hamilton County Water Quality Program

209-7851

APPLICATION FOR

	Date: Permit No.				
	Permit Name:				
	TDEC Num:				
	Permit Fee (\$95 + \$5/acre or fraction)				
	Total Fee				
REQUIRED INFORMATION TO BE INCLUDED WITH PLANS					
	DISTURBED ACREAGE For sites 1 acre and over of a larger development, a NPDES Construction Stormwater Permit must be obtained before issuance of this permit. Please attach a copy of this permit or copy of the completed Notice of Intent to this application. Copies of Civil site plan, including erosion controls, detention, drainage calculations, landscape plan and/or planting plan must be submitted in addition to architectural plans at the Building Inspections Office 757-5105				
	Proposed Starting Date				
-30	Completion Date. This permit will expire on this date if an extension is not requested in writing within 30-days of termination.				
	NOTE: City drainage, storm sewers and sanitary sewers with easements must be shown on plans APPLICANT INFORMATION				
I certify under the penalty of law that I have examined and am famil with the information submitted and believe the submitted informatio be true and accurate.					
	Property owner or general contractor (print)				
	Company				

	7.0.1 2.107,1110.1.1 O.K	
STATE TAX MAP NUMBER	LAND DISTURBING PERMIT	Total Fee
PROPERTY LOCATION	CONTRACTOR INFORMATION	REQUIRED INFORMATION TO BE INCLUDED
Street Number Apt Number	Contract Value \$	WITH PLANS
Street Name	Company Name	DISTURBED ACREAGE
City Zip Code PROPERTY OWNER INFORMATIO	State Lic. City Business Lic. Pax Number ()	For sites 1 acre and over of a larger development, a NPDES Construction Stormwater Permit must be obtained before issuance of this permit. Please attach a copy of this permit or copy of the completed Notice of Intent to this application.
Name	Phone Number ()	Copies of Civil site plan, including erosion controls
Street Address	Contractor Name Street Address	detention, drainage calculations, landscape plan and/or planting plan must be submitted in addition to architectural plans at the Building Inspection Office 757-5105
City, ST ZIP	City, ST ZIP	Proposed Starting Date
Phone () Cell ()	E-Mail Address	Completion Date. This permit will expire on this date if
TYPE OF WORK	CONTACT INFORMATION	an extension is not requested in writing within 30-days of termination.
■ New Construction ■ Demolition ONLY ■ Utilit	ty	NOTE: City drainage, storm sewers and sanitary sewers with easements <u>must</u> be shown on plans
Alteration/AdditionFill ONLYGra	Architect Name:	APPLICANT INFORMATION
New Development Borrow Pit	Phone ()	I certify under the penalty of law that I have examined and am familiar with the information submitted and believe the submitted information to be true and accurate.
PROPERTY OCCUPIED/USED AS ZO How is this property zoned?	Phone EMail Erosion Ctrl Maint: Phone Erosion Ctrl Maint: Phone EMail	Property owner or general contractor (print)
Persons performing construction work under this permit mu	st observe	Company
Tenn. Law (Pub.Chap.289 Acts of 1955) providing for precautaken in vicinity of high voltage wires.	I AND DISTURBING DEDMITS ARE VALID FOR	Signature Date